

B1 (Official Form 1)(04/13)

<b>United States Bankruptcy Court</b> <b>District of New Jersey</b>		<b>Voluntary Petition</b>
Name of Debtor (if individual, enter Last, First, Middle): <b>Jacob, Joly</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Jacob, Anie</b>
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>AKA Anie Joly Jacob</b>
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) <b>xxx-xx-2499</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>xxx-xx-1068</b>
Street Address of Debtor (No. and Street, City, and State): <b>344 Salem Road</b> <b>Moorestown, NJ</b> <div style="text-align: right; font-size: small;">ZIP Code <b>08057</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <b>344 Salem Road</b> <b>Moorestown, NJ</b> <div style="text-align: right; font-size: small;">ZIP Code <b>08057</b></div>
County of Residence or of the Principal Place of Business: <b>Burlington</b>		County of Residence or of the Principal Place of Business: <b>Burlington</b>
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
<b>Type of Debtor</b> (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

## Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**Jacob, Joly**  
**Jacob, Anie**

**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

**Joly Jacob DMD PC**

Case Number:

**15-30046 JNP**

Date Filed:

**10/26/15**

District:

**New Jersey**

Relationship:

**Affiliate**

Judge:

**Poslusny**

### Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

### Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X /s/ William Mackin, Esq.**

**November 30, 2015**

Signature of Attorney for Debtor(s)

(Date)

**William Mackin, Esq. WM2792**

### Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

### Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

### Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

### Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

# Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**Jacob, Joly**  
**Jacob, Anie**

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ Joly Jacob**

Signature of Debtor **Joly Jacob**

**X /s/ Anie Jacob**

Signature of Joint Debtor **Anie Jacob**

Telephone Number (If not represented by attorney)

**November 30, 2015**

Date

### Signature of Attorney\*

**X /s/ William Mackin, Esq.**

Signature of Attorney for Debtor(s)

**William Mackin, Esq. WM2792**

Printed Name of Attorney for Debtor(s)

**Sherman Silverstein Kohl Rose & Podolsky**

Firm Name

**308 Harper Drive**

**Suite 200**

**Moorestown, NJ 08057**

Address

Email: **wmackin@shermansilverstein.com**

**(856) 662-0700**

Telephone Number

**November 30, 2015**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
District of New Jersey**

In re **Joly Jacob  
Anie Jacob**

Debtor(s)

Case No.  
Chapter

**11**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Joly Jacob

Joly Jacob

Date: November 30, 2015

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
District of New Jersey**

In re **Joly Jacob  
Anie Jacob**

Debtor(s)

Case No.  
Chapter

**11**

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Anie Jacob  
Anie Jacob

Date: November 30, 2015

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court**  
**District of New Jersey**

In re **Joly Jacob**  
**Anie Jacob**

Debtor(s)

Case No.

Chapter **11**

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
<b>Bank Of America Attention: Recovery Department 4161 Piedmont Pkwy. Greensboro, NC 27410</b>	<b>Bank Of America Attention: Recovery Department 4161 Piedmont Pkwy. Greensboro, NC 27410</b>	<b>Credit Card</b>		<b>13,778.00</b>
<b>Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130</b>	<b>Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130</b>	<b>Charge Account - business account</b>		<b>5,264.00</b>
<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Credit Card</b>		<b>10,048.00</b>
<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Credit Card</b>		<b>12,082.00</b>
<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Chase Card Po Box 15298 Wilmington, DE 19850</b>	<b>Credit Card</b>		<b>19,798.00</b>
<b>Children's Hospital of PA 3401 Civic Center Blvd. Philadelphia, PA 19104</b>	<b>Children's Hospital of PA 3401 Civic Center Blvd. Philadelphia, PA 19104</b>	<b>Medical bill</b>		<b>5,000.00</b>
<b>Citibank Citicorp/ Centralized Bankruptcy Po Box790040 Saint Louis, MO 63179</b>	<b>Citibank Citicorp/ Centralized Bankruptcy Po Box790040 Saint Louis, MO 63179</b>	<b>Credit Card</b>		<b>13,385.00</b>
<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>Credit Card</b>		<b>8,704.00</b>
<b>Citibank Sd, Na Citi Corp Credit Services/Attn:Centraliz Po Box 790040 Saint Louis, MO 63179</b>	<b>Citibank Sd, Na Citi Corp Credit Services/Attn:Centraliz Po Box 790040 Saint Louis, MO 63179</b>	<b>Credit Card</b>		<b>23,739.00</b>



B4 (Official Form 4) (12/07) - Cont.

In re **Joly Jacob**  
**Anie Jacob**

Case No. \_\_\_\_\_

Debtor(s) \_\_\_\_\_

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
<b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	<b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	<b>Credit Card</b>		<b>19,247.00</b>
<b>Discover Fin Svcs Llc</b> <b>Po Box 15316</b> <b>Wilmington, DE 19850</b>	<b>Discover Fin Svcs Llc</b> <b>Po Box 15316</b> <b>Wilmington, DE 19850</b>	<b>Credit Card - business account</b>		<b>10,793.00</b>
<b>Ditech Financial Llc</b> <b>Po Box 6172</b> <b>Rapid City, SD 57709</b>	<b>Ditech Financial Llc</b> <b>Po Box 6172</b> <b>Rapid City, SD 57709</b>	<b>5435 Paradise Cay Circle</b> <b>Kissimmee, Florida</b>		<b>158,759.00</b> <b>(110,000.00 secured)</b>
<b>Navient</b> <b>Po Box 9655</b> <b>Wilkes Barre, PA 18773</b>	<b>Navient</b> <b>Po Box 9655</b> <b>Wilkes Barre, PA 18773</b>	<b>Educational</b>		<b>25,442.00</b>
<b>Navient</b> <b>Po Box 9655</b> <b>Wilkes Barre, PA 18773</b>	<b>Navient</b> <b>Po Box 9655</b> <b>Wilkes Barre, PA 18773</b>	<b>Educational</b>		<b>25,076.00</b>
<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Educational</b>		<b>26,285.00</b>
<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Educational</b>		<b>20,002.00</b>
<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>Educational</b>		<b>14,003.00</b>
<b>Sears/cbna</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>	<b>Sears/cbna</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>	<b>Credit Card</b>		<b>4,706.00</b>
<b>Sosamma Abraham</b> <b>84 Durness Drive</b> <b>Williamstown, NJ 08094</b>	<b>Sosamma Abraham</b> <b>84 Durness Drive</b> <b>Williamstown, NJ 08094</b>	<b>Personal loan(s) to Debtors</b>		<b>200,000.00</b>
<b>Td Auto Finance</b> <b>Po Box 9223</b> <b>Farmington Hills, MI 48333</b>	<b>Td Auto Finance</b> <b>Po Box 9223</b> <b>Farmington Hills, MI 48333</b>	<b>2102 Mercedes Benz GLK 350 (50,000 miles) (good condition)</b>		<b>32,119.00</b> <b>(20,000.00 secured)</b>

B4 (Official Form 4) (12/07) - Cont.

In re **Joly Jacob**  
**Anie Jacob**

Debtor(s)

Case No. \_\_\_\_\_

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

We, **Joly Jacob** and **Anie Jacob**, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date **November 30, 2015**

Signature **/s/ Joly Jacob**  
**Joly Jacob**  
Debtor

Date **November 30, 2015**

Signature **/s/ Anie Jacob**  
**Anie Jacob**  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court**  
**District of New Jersey**

In re **Joly Jacob,  
Anie Jacob**

Debtors

Case No. \_\_\_\_\_

Chapter **11**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>1,435,000.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>61,751.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>2</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>1,014,506.00</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>3</b>		<b>3,325.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>20</b>		<b>475,615.89</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>28,275.00</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>2</b>			<b>23,429.19</b>
Total Number of Sheets of ALL Schedules		<b>37</b>			
Total Assets			<b>1,496,751.00</b>		
Total Liabilities				<b>1,493,446.89</b>	

**United States Bankruptcy Court**  
**District of New Jersey**

In re **Joly Jacob,  
Anie Jacob**

Debtors

Case No. \_\_\_\_\_

Chapter 11

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>3,325.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>110,808.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>114,133.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	<b>28,275.00</b>
Average Expenses (from Schedule J, Line 22)	<b>23,429.19</b>
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 )	<b>31,417.00</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>60,878.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	<b>0.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>3,325.00</b>
4. Total from Schedule F		<b>475,615.89</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>539,818.89</b>

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
<b>Debtors' residence 344 Salem Road Moorestown, NJ 08057</b>		<b>J</b>	<b>1,325,000.00</b>	<b>823,628.00</b>
<b>5435 Paradise Cay Circle Kissimmee, Florida</b>		<b>J</b>	<b>110,000.00</b>	<b>158,759.00</b>

Sub-Total > **1,435,000.00** (Total of this page)

Total > **1,435,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		<b>Cash</b>	<b>J</b>	<b>1,000.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>PNC Bank Checking Account (7995)</b>	<b>J</b>	<b>3,600.00</b>
		<b>TD Bank checking Account (6641)</b>	<b>J</b>	<b>2,150.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Living room furniture</b>	<b>J</b>	<b>400.00</b>
		<b>TV's (3)</b>	<b>J</b>	<b>400.00</b>
		<b>Household appliances</b>	<b>J</b>	<b>400.00</b>
		<b>Misc. household items</b>	<b>J</b>	<b>500.00</b>
		<b>Computers</b>	<b>J</b>	<b>150.00</b>
		<b>Dining room furniture</b>	<b>J</b>	<b>500.00</b>
		<b>Family room furniture</b>	<b>J</b>	<b>300.00</b>
		<b>Bedroom furniture (3 sets)</b>	<b>J</b>	<b>900.00</b>
		<b>Kitchen furniture</b>	<b>J</b>	<b>200.00</b>
		<b>Basement furniture</b>	<b>J</b>	<b>300.00</b>
		<b>Patio/deck furniture</b>	<b>J</b>	<b>200.00</b>
		<b>Audio/video equipment</b>	<b>J</b>	<b>250.00</b>
		<b>Cell phones</b>	<b>J</b>	<b>300.00</b>

Sub-Total > **11,550.00**  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>Clothing - casual &amp; dress</b>	<b>J</b>	<b>700.00</b>
7. Furs and jewelry.		<b>Jewelry</b>	<b>J</b>	<b>900.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>Whole Life Ins. Policy - Prudential</b>	<b>J</b>	<b>0.00</b>
10. Annuities. Itemize and name each issuer.		<b>Midland National &amp; Nationwide - existing loans (not property of estate)</b>	<b>J</b>	<b>0.00</b>
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)		<b>American Funds 529 Plan (not property of estate)</b>	<b>J</b>	<b>10,000.00</b>
		<b>Educational IRA (not property of estate)</b>	<b>J</b>	<b>7,000.00</b>
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		<b>American Funds (IRA) (not property of estate)</b>	<b>H</b>	<b>2,100.00</b>
		<b>Midland National (IRA) (not property of estate)</b>	<b>W</b>	<b>0.00</b>
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		<b>Joly Jacob DMD, PC (Dentistry Practice) Currently a DIP in case No. 15-30046 JNP</b>	<b>H</b>	<b>0.00</b>
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			

Sub-Total > **20,700.00**  
(Total of this page)

Sheet **1** of **3** continuation sheets attached to the Schedule of Personal Property

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.		<b>Professional licenses DMD (Dentist) Pharmacist</b>	<b>J</b>	<b>1.00</b>
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>2010 Honda Pilot (124,500 miles) (good condition)</b>	<b>J</b>	<b>9,500.00</b>
		<b>2102 Mercedes Benz GLK 350 (50,000 miles) (good condition)</b>	<b>J</b>	<b>20,000.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			

Sub-Total > **29,501.00**  
(Total of this page)

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property



In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			

Sheet **3** of **3** continuation sheets attached to the Schedule of Personal Property

Sub-Total > **0.00**  
(Total of this page)  
Total > **61,751.00**

(Report also on Summary of Schedules)

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☒ 11 U.S.C. § 522(b)(2)☐ 11 U.S.C. § 522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds

\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b><u>Real Property</u></b>			
<b>Debtors' residence</b>	<b>11 U.S.C. § 522(d)(1)</b>	<b>45,950.00</b>	<b>1,325,000.00</b>
<b>344 Salem Road</b>			
<b>Moorestown, NJ 08057</b>			
<b><u>Cash on Hand</u></b>			
<b>Cash</b>	<b>11 U.S.C. § 522(d)(5)</b>	<b>1,000.00</b>	<b>1,000.00</b>
<b><u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u></b>			
<b>PNC Bank Checking Account (7995)</b>	<b>11 U.S.C. § 522(d)(5)</b>	<b>3,600.00</b>	<b>3,600.00</b>
<b>TD Bank checking Account (6641)</b>	<b>11 U.S.C. § 522(d)(5)</b>	<b>2,150.00</b>	<b>2,150.00</b>
<b><u>Household Goods and Furnishings</u></b>			
<b>Living room furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>400.00</b>	<b>400.00</b>
<b>TV's (3)</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>400.00</b>	<b>400.00</b>
<b>Household appliances</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>400.00</b>	<b>400.00</b>
<b>Misc. household items</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>5,000.00</b>	<b>500.00</b>
<b>Computers</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>150.00</b>	<b>150.00</b>
<b>Dining room furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>500.00</b>	<b>500.00</b>
<b>Family room furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>300.00</b>	<b>300.00</b>
<b>Bedroom furniture (3 sets)</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>900.00</b>	<b>900.00</b>
<b>Kitchen furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>200.00</b>	<b>200.00</b>
<b>Basement furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>300.00</b>	<b>300.00</b>
<b>Patio/deck furniture</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>200.00</b>	<b>200.00</b>
<b>Audio/video equipment</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>250.00</b>	<b>250.00</b>
<b>Cell phones</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>300.00</b>	<b>300.00</b>
<b><u>Wearing Apparel</u></b>			
<b>Clothing - casual &amp; dress</b>	<b>11 U.S.C. § 522(d)(3)</b>	<b>700.00</b>	<b>700.00</b>
<b><u>Furs and Jewelry</u></b>			
<b>Jewelry</b>	<b>11 U.S.C. § 522(d)(4)</b>	<b>900.00</b>	<b>900.00</b>
<b><u>Interests in Insurance Policies</u></b>			
<b>Whole Life Ins. Policy - Prudential</b>	<b>11 U.S.C. § 522(d)(7)</b>	<b>100%</b>	<b>0.00</b>
	<b>11 U.S.C. § 522(d)(8)</b>	<b>24,500.00</b>	

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b><u>Annuities</u></b>			
Midland National & Nationwide - existing loans (not property of estate)	11 U.S.C. § 522(d)(10)(E)	100%	0.00
<b><u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u></b>			
American Funds (IRA) (not property of estate)	11 U.S.C. § 522(d)(10)(E) 11 U.S.C. § 522(d)(12)	100% 100%	2,100.00
Midland National (IRA) (not property of estate)	11 U.S.C. § 522(d)(10)(E) 11 U.S.C. § 522(d)(12)	100% 100%	0.00
<b><u>Licenses, Franchises, and Other General Intangibles</u></b>			
Professional licenses DMD (Dentist) Pharmacist	11 U.S.C. § 522(d)(5)	0.00	1.00
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>			
2010 Honda Pilot (124,500 miles) (good condition)	11 U.S.C. § 522(d)(2)	7,350.00	9,500.00

Total: **99,650.00** **1,349,751.00**

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D	W I F E	J O I N T	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		Husband, Wife, Joint, or Community							
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN							
Account No. <b>xxxxx5939</b>		<b>Opened 4/01/12 Last Active 8/03/15</b>							
<b>Columbia Savings Bank</b> <b>19-01 Route 208 N</b> <b>Fair Lawn, NJ 07410</b>	<b>J</b>								
		<b>Debtors' residence</b> <b>344 Salem Road</b> <b>Moorestown, NJ 08057</b>						<b>823,628.00</b>	<b>0.00</b>
		Value \$ <b>1,325,000.00</b>							
Account No. <b>xxxx6945</b>		<b>Opened 4/01/13 Last Active 7/10/15</b>							
<b>Ditech Financial Llc</b> <b>Po Box 6172</b> <b>Rapid City, SD 57709</b>	<b>J</b>								
		<b>Mortgage</b> <b>5435 Paradise Cay Circle</b> <b>Kissimmee, Florida</b>						<b>158,759.00</b>	<b>48,759.00</b>
		Value \$ <b>110,000.00</b>							
Account No. <b>xxxxxx4640</b>		<b>Opened 5/01/14 Last Active 7/12/15</b>							
<b>Td Auto Finance</b> <b>Po Box 9223</b> <b>Farmington Hills, MI 48333</b>	<b>H</b>								
		<b>2102 Mercedes Benz GLK 350 (50,000 miles) (good condition)</b>						<b>32,119.00</b>	<b>12,119.00</b>
		Value \$ <b>20,000.00</b>							
Account No.									
		Value \$							
Subtotal (Total of this page)								<b>1,014,506.00</b>	<b>60,878.00</b>
Total (Report on Summary of Schedules)								<b>1,014,506.00</b>	<b>60,878.00</b>

0 continuation sheets attached

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### ☐ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☒ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.			<b>2010</b>					
<b>City of Philadelphia</b>			<b>Business Priviledge Tax 2010</b>					<b>0.00</b>
	<b>J</b>						<b>0.00</b>	<b>0.00</b>
Account No.			<b>Listed for Notice Purposes</b>					
<b>Employment Security Agency CN-077 Trenton, NJ 08625</b>				<b>X</b>	<b>X</b>	<b>X</b>		<b>0.00</b>
	<b>J</b>						<b>0.00</b>	<b>0.00</b>
Account No.								
<b>Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346</b>								<b>0.00</b>
	<b>J</b>						<b>0.00</b>	<b>0.00</b>
Account No.			<b>Listed for Notice Purposes</b>					
<b>New Jersey Attorney General Office Division of Law Richard J. Hughes Justice Complex 25 Market Street, P.O. Box 112 Trenton, NJ 08625-0112</b>				<b>X</b>	<b>X</b>	<b>X</b>		<b>0.00</b>
	<b>J</b>						<b>0.00</b>	<b>0.00</b>
Account No.			<b>Listed for Notice Purposes</b>					
<b>Office of Attorney General Hughes Justice Complex P.O. Box 080 25 W. Market Street Trenton, NJ 08625</b>				<b>X</b>	<b>X</b>	<b>X</b>		<b>0.00</b>
	<b>J</b>						<b>0.00</b>	<b>0.00</b>
Subtotal								<b>0.00</b>
(Total of this page)							<b>0.00</b>	<b>0.00</b>

Sheet **1** of **2** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.			<b>Gross income taxes</b>				<b>3,325.00</b>	
<b>State of New Jersey Division of Taxation P.O. Box 046 Trenton, NJ 08646-0046</b>	<b>J</b>							<b>3,325.00</b>
								<b>0.00</b>
Account No.			<b>Listed for Notice Purposes</b>				<b>0.00</b>	
<b>State of New Jersey Division of Taxation Bankruptcy Unit CN 045 Trenton, NJ 08695</b>	<b>J</b>			<b>X</b>	<b>X</b>	<b>X</b>		<b>0.00</b>
								<b>0.00</b>
Account No.			<b>Listed for Notice Purposes</b>				<b>0.00</b>	
<b>State of New Jersey, Dept of Treasury Division of Pensions and Benefits PO Box 295 Trenton, NJ 08625-0295</b>	<b>J</b>			<b>X</b>	<b>X</b>	<b>X</b>		<b>0.00</b>
								<b>0.00</b>
Account No.								
Account No.								
Subtotal								<b>3,325.00</b>
(Total of this page)							<b>3,325.00</b>	<b>0.00</b>
Total								<b>3,325.00</b>
(Report on Summary of Schedules)							<b>3,325.00</b>	<b>0.00</b>

Sheet **2** of **2** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxx5260  <b>Amca</b> <b>2269 S Saw Mill</b> <b>Elmsford, NY 10523</b>	H	<b>Last Active 8/11/14</b>  <b>Med1 02 Quest Diagnostics Incorporat</b>				<b>0.00</b>
Account No. xxxxxxxxxxx8763  <b>American Express</b> <b>Po Box 3001</b> <b>16 General Warren Blvd</b> <b>Malvern, PA 19355</b>	W	<b>Opened 1/01/96 Last Active 8/14/15</b>  <b>Credit Card</b>				<b>3,400.00</b>
Account No. xxxxxxxxxxx2613  <b>American Express</b> <b>Po Box 3001</b> <b>16 General Warren Blvd</b> <b>Malvern, PA 19355</b>	H	<b>Opened 1/01/96 Last Active 8/14/15</b>  <b>Credit Card</b>				<b>3,400.00</b>
Account No. xxxxx3371  <b>American Honda Finance</b> <b>Po Box 168088</b> <b>Irving, TX 75016</b>	H	<b>Opened 10/01/09 Last Active 9/29/10</b>  <b>Automobile</b>				<b>0.00</b>
Subtotal (Total of this page)						<b>6,800.00</b>

19 continuation sheets attached



B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. xxxxxxxxxxx1023	H		Opened 11/28/08 Last Active 4/01/14				0.00	
Amex Dsnb 9111 Duke Blvd Mason, OH 45040			Credit Card					
Account No. xxxxxx0671	J		Opened 7/01/96 Last Active 9/08/99				Unknown	
Amex/American Express American Express Special Research Po Box 981540 El Paso, TX 79998			Credit Card					
Account No. xxxx3889	H		Med1 02 Larchmont Imaging Associates				1,140.00	
Apex Asset 2501 Oregon Pike Lancaster, PA 17601								
Account No. xxxxxxxxxxx9856	W		Opened 9/01/12 Last Active 8/19/15				13,778.00	
Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410			Credit Card					
Account No. xxxxx6387	J		Opened 11/01/06 Last Active 11/28/11				Unknown	
Bank of America Attn: Correspondence Unit/CA6-919- 02-41 Po Box 5170 Simi Valley, CA 93062			Real Estate Mortgage					
Sheet no. <u>1</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	14,918.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. xxxxxxxxxxxx5824	J	Opened 12/01/07 Last Active 5/31/10				0.00	
Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410		Credit Card					
Account No. xxxxx0044	J	Opened 1/01/07 Last Active 4/25/12				0.00	
Bank of America Attn: Correspondence Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062		Real Estate Mortgage					
Account No. xxxx4654	J	Opened 3/01/05 Last Active 2/14/07				0.00	
Bank of America Attn: Correspondence Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062		Real Estate Mortgage					
Account No. 0329	H	Opened 12/01/07 Last Active 5/07/08				0.00	
Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410		Credit Card					
Account No.	J	Business debt. Personal liability amount dipsuted			X	0.00	
Banker's Healthcare Group, Inc. 4875 Volunteer Road, Suite 100 Fort Lauderdale, FL 33330							
Sheet no. 2 of 19 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>Business debt. Personal liability amount dipsuted.</b>				
<b>Bankers Healthcare 4875 Volunteers Road, Suite 100 Southwest Ranch, FL 33330</b>	<b>J</b>				<b>X</b>	<b>0.00</b>
Account No. xxxxxxxxxxxx5246		<b>Opened 5/01/02 Last Active 5/16/08</b>				
<b>Bk Of Amer Po Box 982235 El Paso, TX 79998</b>	<b>J</b>	<b>Credit Card</b>				<b>0.00</b>
Account No. xxxxxxxxxxxx3062		<b>Opened 12/01/04 Last Active 2/08/07</b>				
<b>Bk Of Amer Po Box 982235 El Paso, TX 79998</b>	<b>J</b>	<b>Credit Card</b>				<b>0.00</b>
Account No. xxxxxxxxxxxx5426		<b>Opened 11/14/05 Last Active 8/30/06</b>				
<b>Bombay/Prism/Citibank Po Box 20507 Attn: Centralized Bankruptcy Kansas City, MO 64195</b>	<b>H</b>	<b>Charge Account</b>				<b>0.00</b>
Account No. xxxxxxxxxxxx9863		<b>Opened 1/12/05 Last Active 3/09/07</b>				
<b>Bombay/Prism/Citibank Po Box 20507 Attn: Centralized Bankruptcy Kansas City, MO 64195</b>	<b>W</b>	<b>Charge Account</b>				<b>0.00</b>
Sheet no. <u>3</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxx1691</b>  <b>Cap1/boscv</b> <b>26525 N Riverwoods Blvd</b> <b>Mettawa, IL 60045</b>	<b>J</b>	Opened 3/22/04 Last Active 7/06/06  Charge Account				0.00
Account No. <b>xxxxxxxxxxxx4872</b>  <b>Capital 1 Bank</b> <b>Attn: General Correspondence</b> <b>Po Box 30285</b> <b>Salt Lake City, UT 84130</b>	<b>X H</b>	Opened 3/01/15 Last Active 6/18/15  Charge Account - business account				5,264.00
Account No. <b>xxxxxxxxxxxx4750</b>  <b>Capital 1 Bank</b> <b>Attn: General Correspondence</b> <b>Po Box 30285</b> <b>Salt Lake City, UT 84130</b>	<b>W</b>	Opened 4/28/11 Last Active 4/01/14  Charge Account				0.00
Account No. <b>xxxxxxxxxxxx0634</b>  <b>Capital One</b> <b>Po Box 5253</b> <b>Carol Stream, IL 60197</b>	<b>H</b>	Opened 10/01/05 Last Active 12/01/05  Credit Card				0.00
Account No. <b>xxxxxxxxxxxx0211</b>  <b>Cbna</b> <b>Po Box 6283</b> <b>Sioux Falls, SD 57117</b>	<b>H</b>	Opened 11/01/04 Last Active 3/13/05  Credit Card				0.00
Sheet no. <u>4</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>5,264.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxx6991</b>  <b>Cbna</b> <b>Po Box 6189</b> <b>Sioux Falls, SD 57117</b>	<b>H</b>	<b>Opened 8/01/05 Last Active 9/17/05</b>  <b>Charge Account</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxx0258</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>		<b>Opened 4/23/01 Last Active 8/13/15</b>  <b>Credit Card</b>				<b>19,798.00</b>
Account No. <b>xxxxxxxxxxx7167</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>J</b>	<b>Opened 11/01/06 Last Active 8/11/15</b>  <b>Credit Card</b>				<b>12,082.00</b>
Account No. <b>xxxxxxxxxxx4482</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>		<b>Opened 6/01/05 Last Active 8/04/15</b>  <b>Credit Card</b>				<b>10,048.00</b>
Account No. <b>xxxxxxxxxxx3237</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>W</b>	<b>Opened 7/01/07 Last Active 9/21/07</b>  <b>Credit Card</b>				<b>0.00</b>
Sheet no. <u>5</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>41,928.00</b>
Subtotal (Total of this page)						<b>41,928.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxxxxxx6521</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>W</b>	Opened 3/01/07 Last Active 6/01/09  Credit Card				0.00
Account No. <b>xxxxxxxxx6067</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>J</b>	Opened 7/01/02 Last Active 2/20/05  Credit Card				0.00
Account No. <b>xxxxxxxxxxx7264</b>  <b>Chase Card</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>J</b>	Opened 4/01/02 Last Active 2/08/07  Credit Card				0.00
Account No. <b>7167</b>  <b>Chase Freedom</b> <b>P.O. Box 15153</b> <b>Wilmington, DE 19886-5153</b>	<b>J</b>	Business debt. Personal liability amount dipsuted.			<b>X</b>	0.00
Account No. <b>4482</b>  <b>Chase Slate</b> <b>P.O. Box 15153</b> <b>Wilmington, DE 19886-5153</b>	<b>J</b>	Business debt. Personal liability amount dipsuted.			<b>X</b>	0.00
Sheet no. <u>6</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>Medical bill</b>				
<b>Children's Hospital of PA 3401 Civic Center Blvd. Philadelphia, PA 19104</b>	<b>J</b>					<b>5,000.00</b>
Account No. xxxxxxxxxxxx2139		<b>Opened 7/24/13 Last Active 8/17/15</b>				
<b>Citibank Citicorp/ Centralized Bankruptcy Po Box790040 Saint Louis, MO 63179</b>	<b>J</b>	<b>Credit Card</b>				<b>13,385.00</b>
Account No. xxxxxxxxxxxx7275		<b>Opened 6/01/02 Last Active 7/28/15</b>				
<b>Citibank Sd, Na Citi Corp Credit Services/Attn:Centraliz Po Box 790040 Saint Louis, MO 63179</b>	<b>J</b>	<b>Credit Card</b>				<b>23,739.00</b>
Account No. xxxxxxxxxxxx3256		<b>Opened 6/01/05 Last Active 7/28/15</b>				
<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>J</b>	<b>Credit Card</b>				<b>19,247.00</b>
Account No. xxxxxxxxxxxx8984		<b>Opened 7/01/11 Last Active 8/21/15</b>				
<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>J</b>	<b>Credit Card</b>				<b>8,704.00</b>
Sheet no. <u>7</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>70,075.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx4213  <b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	J	Opened 8/01/99 Last Active 9/13/05  <b>Credit Card</b>				0.00
Account No. xxxxxxxxxxxx3291  <b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	W	Opened 10/06/06 Last Active 11/01/08  <b>Credit Card</b>				0.00
Account No. xxxxxxxxxxxx0809  <b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	H	Opened 2/01/05 Last Active 8/01/08  <b>Credit Card</b>				0.00
Account No.  <b>Citizens Bank</b> <b>1 Citizen's Plaza</b> <b>Providence, RI 02903</b>	J	<b>Business debt. Personal liability and amount dipsuted.</b>			X	0.00
Account No. xxxxx0348  <b>Comenity Bank/Express</b> <b>Attn: Bankruptcy</b> <b>P.O. Box 182686</b> <b>Columbus, OH 43218</b>	W	Opened 8/25/09 Last Active 8/25/09  <b>Charge Account</b>				0.00
Sheet no. <u>8</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>0.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 2060	J	Business debt. Personal liability amount dipsuted.			X	0.00
DeLage Landen DeLage Landen Financial Services, Inc. P.O. Box 41602 Philadelphia, PA 19101-1602						
Account No.	J	Business debt. Personal liability amount dipsuted			X	0.00
Direct Capital Corp. 155 Commerce Way Portsmouth, NH 03801						
Account No.	J	Business debt. Personal liability amount dipsuted.			X	0.00
Direct Capital Corp. 155 Commerce Way Portsmouth, NH 03801						
Account No. xxxxxxxxxxxx8862	X H	Opened 3/03/13 Last Active 8/16/15  Credit Card - business account				10,793.00
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850						
Account No. xxxxxxxxxxxx6498	J	Opened 6/01/05 Last Active 7/01/08  Credit Card				0.00
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850						
Sheet no. 9 of 19 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						10,793.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. xxxxxxxxxxx3233	H	Opened 2/01/07 Last Active 3/05/12				0.00
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		Credit Card				
Account No. xxxxxxxxxxx8621	H	Opened 5/01/04 Last Active 2/01/07				0.00
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		Credit Card				
Account No. xxxx6422	J	Opened 11/01/06 Last Active 4/02/13				0.00
Ditech Financial Llc Po Box 6172 Rapid City, SD 57709		Real Estate Mortgage				
Account No. xxxxxxxxx1320	H	Opened 10/14/06 Last Active 2/10/10				0.00
Dsnb Macys 911 Duke Blvd Mason, OH 45040		Charge Account				
Account No. xxxxxxxxx1120	W	Opened 4/01/04 Last Active 4/13/15				0.00
Dsnb Macys 911 Duke Blvd Mason, OH 45040		Charge Account				
Sheet no. <u>10</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						0.00
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No. xxxxxxxxxxxx1247	J		Opened 9/01/06 Last Active 4/23/07				0.00	
Elan Fin Svc 777 E Wisconsin Ave Milwaukee, WI 53202			Credit Card					
Account No. xxxxxxxxxxxx8046	J		Opened 9/01/06 Last Active 2/23/07				Unknown	
Elan Fin Svc 777 E Wisconsin Ave Milwaukee, WI 53202			Credit Card					
Account No. xxxxxxxxxxxx2631	J		Opened 12/01/01 Last Active 4/05/06				0.00	
Fia Csna 4060 Ogletown/Stanton Rd Newark, DE 19713			Credit Card					
Account No. xxxxxxxx4000	H		Opened 4/01/04 Last Active 4/25/08				0.00	
First Data 1307 Walt Whitman Rd Melville, NY 11747			Lease					
Account No. xxxxxxxxxxxx1488	W		Opened 3/26/09 Last Active 4/26/09				0.00	
Gemb/walmart 4125 Windward Plaza Alpharetta, GA 30005			Charge Account					
Sheet no. 11 of 19 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>0805</b>  <b>Highland Capital</b> <b>5 Centre Avenue</b> <b>Little Falls, NJ 07424</b>	<b>J</b>	<b>Business debt. Personal liability amount dipsuted.</b>			<b>X</b>	<b>0.00</b>
Account No. <b>xxxxxx1950</b>  <b>Hsbc Mortgage Corp Usa</b> <b>2929 Walden Avenue</b> <b>Depew, NY 14043</b>	<b>J</b>	<b>Opened 5/01/06 Last Active 1/11/07</b>  <b>Credit Line Secured</b>				<b>0.00</b>
Account No.  <b>Jose Costa/Costa Construction</b> <b>602 Dauphin Street</b> <b>Riverside, NJ 08075</b>	<b>J</b>	<b>Business debt. Personal liability amount dipsuted.</b>			<b>X</b>	<b>0.00</b>
Account No. <b>xxxxxxxxxxxx1295</b>  <b>Kohls/capone</b> <b>Po Box 3115</b> <b>Milwaukee, WI 53201</b>	<b>J</b>	<b>Opened 11/01/10 Last Active 5/23/12</b>  <b>Charge Account</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxxx4159</b>  <b>Kohls/capone</b> <b>Po Box 3115</b> <b>Milwaukee, WI 53201</b>	<b>H</b>	<b>Opened 11/01/12 Last Active 1/06/13</b>  <b>Charge Account</b>				<b>0.00</b>
Sheet no. <b>12</b> of <b>19</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>0.00</b>
Subtotal (Total of this page)						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>medical bill</b>				
<b>Larchmont Imaging 401 Young Ave Suite 185 Moorestown, NJ 08057</b>	<b>J</b>					<b>1,310.68</b>
Account No. <b>xxxxxx6097</b>		<b>Opened 10/01/05 Last Active 2/03/09</b>				
<b>Mb Fin Svcs 36455 Corporate Dr Farmington Hills, MI 48331</b>	<b>H</b>	<b>Lease</b>				<b>0.00</b>
Account No. <b>xxxxxx7382</b>		<b>Opened 11/01/11 Last Active 7/18/14</b>				
<b>Mb Fin Svcs 36455 Corporate Dr Farmington Hills, MI 48331</b>	<b>H</b>	<b>Lease</b>				<b>0.00</b>
Account No. <b>xxxxxx8366</b>		<b>Opened 3/01/09 Last Active 11/18/11</b>				
<b>Mb Fin Svcs 36455 Corporate Dr Farmington Hills, MI 48331</b>	<b>H</b>	<b>Lease</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxxx8219</b>		<b>Opened 11/01/12 Last Active 8/16/15</b>				
<b>Navient Po Box 9655 Wilkes Barre, PA 18773</b>	<b>J</b>	<b>Educational</b>				<b>25,442.00</b>
Sheet no. <u>13</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>26,752.68</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxxxxxxx8092</b>  <b>Navient</b> <b>Po Box 9655</b> <b>Wilkes Barre, PA 18773</b>	<b>J</b>	<b>Opened 7/01/13 Last Active 8/16/15</b>  <b>Educational</b>				<b>25,076.00</b>
Account No.  <b>Pioneer credit recovery</b> <b>P.o.Box 1018</b> <b>Moorestown, NJ 08057</b>	<b>J</b>					<b>3,383.92</b>
Account No. <b>xxxxxxxxxxxx3310</b>  <b>Pnc - Clc</b> <b>Po Box 3180</b> <b>Pittsburgh, PA 15230</b>	<b>J</b>	<b>Opened 9/01/06 Last Active 9/24/10</b>  <b>Credit Card</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxxx3381</b>  <b>Pnc Bank, N.a.</b> <b>1 Financial Pkwy</b> <b>Kalamazoo, MI 49009</b>	<b>J</b>	<b>Opened 9/01/06 Last Active 12/08/13</b>  <b>Credit Card</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxxx6389</b>  <b>Prsm/cbna</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>	<b>H</b>	<b>Opened 6/21/07 Last Active 3/09/07</b>  <b>Credit Card</b>				<b>0.00</b>
Sheet no. <u>14</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>28,459.92</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxxxxxxx2945</b>  <b>Prsm/cbna</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>	<b>H</b>	<b>Opened 6/26/08 Last Active 6/25/09</b>  <b>Credit Card</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxx9538</b>  <b>Quickn Loans</b> <b>1050 Woodward Avenue</b> <b>Detroit, MI 48226</b>	<b>J</b>	<b>Opened 4/01/13 Last Active 5/14/13</b>  <b>Real Estate Mortgage</b>				<b>0.00</b>
Account No. <b>xxxxxxxxxxxx6469</b>  <b>Rymr&amp;fnign</b> <b>Po Box 94498</b> <b>Las Vegas, NV 89193</b>	<b>H</b>	<b>Opened 4/01/14 Last Active 8/16/15</b>  <b>Charge Account</b>				<b>1,802.00</b>
Account No. <b>xxxxxxxxxxxx0793</b>  <b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>J</b>	<b>Opened 12/01/14 Last Active 8/19/15</b>  <b>Educational</b>				<b>26,285.00</b>
Account No. <b>xxxxxxxxxxxx7954</b>  <b>Sallie Mae</b> <b>300 Continental Dr</b> <b>Newark, DE 19713</b>	<b>J</b>	<b>Opened 7/01/14 Last Active 8/16/15</b>  <b>Educational</b>				<b>20,002.00</b>
Sheet no. <u>15</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>48,089.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx9910  Sallie Mae 300 Continental Dr Newark, DE 19713	J	Opened 7/01/15 Last Active 8/21/15  Educational				14,003.00
Account No. xxxxxxxxxxxx9454  Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076	J	Opened 12/12/04 Last Active 1/01/06  Charge Account				0.00
Account No. xxxxxxxxxxxx3909  Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076	W	Opened 12/12/04 Last Active 1/01/12  Charge Account				0.00
Account No. xxxxxxxxxxxx3909  Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076	W	Opened 12/01/04 Last Active 12/21/14  Charge Account				0.00
Account No. xxxxxxxxxxxx1238  Sears/cbna Po Box 6497 Sioux Falls, SD 57117	W	Opened 3/01/14 Last Active 7/26/15  Credit Card				4,706.00
Sheet no. <u>16</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>18,709.00</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.	J	Personal loan(s) to Debtors				200,000.00
Sosamma Abraham 84 Durness Drive Williamstown, NJ 08094						
Account No. xxxxxxxxxxxx0755	W	Opened 6/01/13 Last Active 5/18/14  Charge Account				0.00
Syncb/american Signatu C/o P.o. Box 965036 Orlando, FL 32896						
Account No. xxxxxxxxxxxx3519	H	Opened 7/01/14 Last Active 7/28/14  Credit Card				0.00
Synchrony Bank/Gap Attn: bankruptcy Po Box 103104 Roswell, GA 30076						
Account No. xxxxxxxx6154	W	Opened 12/01/01 Last Active 8/01/05  Charge Account				0.00
Synchrony Bank/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076						
Account No. xxxxxxxxxxxx9711	H	Opened 1/11/99 Last Active 2/01/99  Charge Account				0.00
Synchrony Bank/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076						
Sheet no. <u>17</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						200,000.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. xxxxxxxxxxxx8804	W	Opened 8/01/13 Last Active 9/26/13				0.00	
Synchrony Bank/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076		Charge Account					
Account No. xxxxxxxx2200	W	Opened 8/01/05 Last Active 10/10/05				0.00	
Synchrony Bank/Lenscrafters Attn: Bankruptcy Po Box 103104 Roswell, GA 30076		Charge Account					
Account No. xxxxxxxx1113	W	Opened 7/01/03 Last Active 12/23/04				0.00	
Synchrony Bank/Lowes Attn: Bankruptcy Po Box 103104 Roswell, GA 30076		Charge Account					
Account No. xxxxxxxxxxxx1238	W	Opened 7/20/08 Last Active 10/10/08				0.00	
Synchrony Bank/Old Navy Attn: Bankruptcy Po Box 130104 Roswell, GA 30076		Credit Card					
Account No. xxxxxxxxxxxx5795	H	Opened 11/26/05 Last Active 1/10/06				0.00	
Target N.b. Po Box 673 Minneapolis, MN 55440		Credit Card					
Sheet no. <u>18</u> of <u>19</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxxB983</b>	<b>H</b>	<b>Opened 9/01/05 Last Active 9/09/09</b>				<b>0.00</b>
<b>Toyota Motor Credit Co Toyota Financial Services Po Box 8026 Cedar Rapid, IA 52408</b>		<b>Lease</b>				
Account No. <b>xxxxxxG110</b>	<b>H</b>	<b>Opened 11/01/11 Last Active 11/25/14</b>				<b>1,927.29</b>
<b>Toyota Mtr Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408</b>		<b>Lease</b>				
Account No. <b>6949</b>	<b>J</b>					<b>1,900.00</b>
<b>Wells Fargo Financial National Bank P.O. Box 10347 Des Moines, IA 50306-0347</b>						
Account No. <b>xxxxxxxxxxxx7147</b>	<b>H</b>	<b>Opened 12/01/04 Last Active 7/09/05</b>				<b>0.00</b>
<b>Wffnatlbnk Po Box 94498 Las Vegas, NV 89193</b>		<b>Charge Account</b>				
Account No.						
Sheet no. <b>19</b> of <b>19</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>3,827.29</b>
(Report on Summary of Schedules)						<b>Total 475,615.89</b>

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
<b>Toyota Mtr Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408</b>	<b>Acct# 20392GW858 Opened 11/01/14 Lease</b>

In re **Joly Jacob,  
Anie Jacob**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Joly Jacob DMD, P.C. 443 W. Girard Avenue Philadelphia, PA 19123</b>	<b>Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130</b>
<b>Joly Jacob DMD, P.C. 443 W. Girard Avenue Philadelphia, PA 19123</b>	<b>Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850</b>

Fill in this information to identify your case:

Debtor 1 Joly Jacob

Debtor 2 Anie Jacob  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<p>1. Fill in your employment information.</p> <p>If you have more than one job, attach a separate page with information about additional employers.</p> <p>Include part-time, seasonal, or self-employed work.</p> <p>Occupation may include student or homemaker, if it applies.</p>	<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
	<b>Occupation</b>	Dentist	Pharmacist
	<b>Employer's name</b>	Joly Jacob DMD, P.C.	North Phila Health Systems
	<b>Employer's address</b>	443 W. Girard Avenue Philadelphia, PA 19123	8th & Girard Avenue Philadelphia, PA 19122
	<b>How long employed there?</b>	14 yrs.	3 yrs.

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 18,200.00	\$ 13,217.00
3. Estimate and list monthly overtime pay.	+\$ 0.00	+\$ 0.00
4. Calculate gross income. Add line 2 + line 3.	\$ 18,200.00	\$ 13,217.00

Debtor 1 **Joly Jacob**  
Debtor 2 **Anie Jacob**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	\$ 18,200.00	\$ 13,217.00	
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 2,600.00	
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ 542.00	
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00	
5e. Insurance	\$ 0.00	\$ 0.00	
5f. Domestic support obligations	\$ 0.00	\$ 0.00	
5g. Union dues	\$ 0.00	\$ 0.00	
5h. Other deductions. Specify:	\$ 0.00	\$ 0.00	
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	\$ 0.00	\$ 3,142.00	
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	\$ 18,200.00	\$ 10,075.00	
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ 0.00	
8b. Interest and dividends	\$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00	
8d. Unemployment compensation	\$ 0.00	\$ 0.00	
8e. Social Security	\$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	\$ 0.00	\$ 0.00	
8g. Pension or retirement income	\$ 0.00	\$ 0.00	
8h. Other monthly income. Specify:	\$ 0.00	\$ 0.00	
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 0.00	\$ 0.00	
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 18,200.00	\$ 10,075.00	= \$ 28,275.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify:			
		+\$ 0.00	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related Data, if it applies			\$ 28,275.00 <b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Fill in this information to identify your case:

Debtor 1 Joly Jacob

Debtor 2 Anie Jacob  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

8

- ☐ No
- ☒ Yes

Daughter

18

- ☐ No
- ☒ Yes

Son

20

- ☐ No
- ☒ Yes

- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 9,319.76

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$ 0.00

4b. \$ 315.00

4c. \$ 600.00

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00



Debtor 1 **Joly Jacob**  
Debtor 2 **Anie Jacob**

Case number (if known) \_\_\_\_\_

6. <b>Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>950.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>300.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>700.00</b>
6d. Other. Specify: <u>Cable/Internet</u>	6d. \$	<b>210.00</b>
7. <b>Food and housekeeping supplies</b>		7. \$ <b>1,000.00</b>
8. <b>Childcare and children's education costs</b>		8. \$ <b>2,000.00</b>
9. <b>Clothing, laundry, and dry cleaning</b>		9. \$ <b>500.00</b>
10. <b>Personal care products and services</b>		10. \$ <b>200.00</b>
11. <b>Medical and dental expenses</b>		11. \$ <b>250.00</b>
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.		12. \$ <b>400.00</b>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>		13. \$ <b>250.00</b>
14. <b>Charitable contributions and religious donations</b>		14. \$ <b>300.00</b>
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>694.00</b>
15b. Health insurance	15b. \$	<b>250.00</b>
15c. Vehicle insurance	15c. \$	<b>300.00</b>
15d. Other insurance. Specify: <u>Disability Policy</u>	15d. \$	<b>146.39</b>
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		16. \$ <b>0.00</b>
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>0.00</b>
17b. Car payments for Vehicle 2	17b. \$	<b>0.00</b>
17c. Other. Specify: <u>Student Loan - Sallie Mae</u>	17c. \$	<b>178.74</b>
17d. Other. Specify: <u>Student Loan - Navient</u>	17d. \$	<b>326.30</b>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>		18. \$ <b>0.00</b>
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____		\$ <b>0.00</b>
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>100.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>300.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>200.00</b>
21. <b>Other:</b> Specify: <u>Car maintenance</u>	21. +\$	<b>200.00</b>
<u>YMCA membership</u>	+\$	<b>85.00</b>
<u>Kissimmee utilities</u>	+\$	<b>450.00</b>
<u>Gymnastics, Dance class, music lessons, karate, swimming</u>	+\$	<b>509.00</b>
<u>Kumon learning</u>	+\$	<b>315.00</b>
<u>Annuity loan</u>	+\$	<b>2,080.00</b>
22. <b>Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.	22. \$	<b>23,429.19</b>
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<b>28,275.00</b>
23b. Copy your monthly expenses from line 22 above.	23b. -\$	<b>23,429.19</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<b>4,845.81</b>
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain:		

**United States Bankruptcy Court  
District of New Jersey**

In re **Joly Jacob  
Anie Jacob**

Debtor(s)

Case No.

Chapter

**11**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **39** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **November 30, 2015**

Signature **/s/ Joly Jacob**

**Joly Jacob**

Debtor

Date **November 30, 2015**

Signature **/s/ Anie Jacob**

**Anie Jacob**

Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

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**United States Bankruptcy Court  
District of New Jersey**

In re **Joly Jacob  
Anie Jacob**

Debtor(s)

Case No.

Chapter

**11**

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT  
**\$161,374.00**  
**\$160,605.00**  
**\$178,223.00**  
**\$16,911.00**  
**\$18,319.00**

SOURCE  
**2015 YTD: North Phila Health Systems & Joly Jacob DMD**  
**2014: North Phila Health Systems & Joly Jacob DMD**  
**2013: North Phila Health Systems & Joly Jacob DMD**  
**2014: Joly Jacob DMD, P.C.**  
**2013: Joly Jacob DMD, P.C.**

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## 2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

## 3. Payments to creditors

None ☒ **Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	---------------------------------	---	--------------------

None ☐ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	--------------------

Sosanna Abraham

\$0.00

\$200,000.00

Personal loan

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	-------------------------	---------------------------------	--------------------------

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---	-----------------	--------------------------------------

#### 5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
---	--	--------------------------------------

#### 6. Assignments and receiverships

None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------	-----------------------	-----------------------------------

None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

#### 7. Gifts

None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
---	-----------------------------------	--------------	----------------------------------

#### 8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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#### 9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>William Mackin, Esquire</b> <b>106 N. Broad Street</b> <b>Woodbury, NJ 08096</b>		<b>\$15,000.00 (Legal Fee)</b> <b>\$1717 (Filing Fee)</b>
<b>Access Counseling</b>	<b>11/11/15</b>	<b>8.95 - credit counseling</b>

#### 10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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#### 11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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#### 12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
<b>PNC Bank</b> <b>6 Centerton Road</b> <b>Mount Laurel, NJ 08054</b>	<b>Anie Jacobo</b> <b>344 Salem Rd., Moorestown, NJ</b> <b>08057</b>	<b>Important documents</b>	

#### 13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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#### 14. Property held for another person

None ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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#### 15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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#### 16. Spouses and Former Spouses

None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18 . Nature, location and name of business**

None

- ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Joly Jacob DMD, P.C.	23-3045906	443 W. Girard Avenue Philadelphia, PA 19123	Dental office	5/31/00 to present

None

- ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

**19. Books, records and financial statements**

None

- ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
Joly Jacob 443 W. Girard Ave. Philadelphia, PA 19123	
George Matthew, CPA 1922 Cottman Avenue Philadelphia, PA 19111	Yearly tax filing

None

- ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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None

- ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
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- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

## 20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

- None ☐ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY  
RECORDS

## 21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

## 22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

## 23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS  
OF RECIPIENT,  
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE  
OF WITHDRAWAL

AMOUNT OF MONEY  
OR DESCRIPTION AND  
VALUE OF PROPERTY

## 24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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**25. Pension Funds.**

None ☐ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \*

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **November 30, 2015**

Signature **/s/ Joly Jacob**  
**Joly Jacob**  
Debtor

Date **November 30, 2015**

Signature **/s/ Anie Jacob**  
**Anie Jacob**  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

United States Bankruptcy Court  
District of New Jersey

In re **Joly Jacob**  
**Anie Jacob**

Debtor(s)

Case No.

Chapter **11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>15,000.00</b>
Prior to the filing of this statement I have received .....	\$	<b>15,000.00</b>
Balance Due .....	\$	<b>0.00</b>

2. \$ **1,717.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**NONE**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**ANY OTHER SERVICE, INCLUDING BUT NOT LIMITED TO APPEARANCES, THE DEFENSE OF, OPPOSITION TO, FILING ON DEBTORS BEHALF OR OTHERWISE ADDRESSING ANY MOTIONS FOR RELIEF FROM STAY, CRAM DOWN, AVOIDANCE OF LIENS, ADVERSARY PROCEEDINGS, OBJECTIONS TO EXPENSES OR EXEMPTIONS, DISCHARGEABILITY ISSUES, DISCHARGE REVOCATION ISSUES, VALUATION OF PROPERTY MATTERS, 2004 EXAMINATIONS OR ANY OTHER MATTER ARISING FROM, IN CONNECTION WITH OR RELATED TO THE FILING OF THE BANKRUPTCY PETITION UNLESS SPECIFICALLY IDENTIFIED HEREINABOVE AS BEING SPECIFICALLY INCLUDED IN THE SERVICES BEING PROVIDED FOR THE FEES IDENTIFIED HEREIN.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: **November 30, 2015**

/s/ William Mackin, Esq.

**William Mackin, Esq. WM2792**  
**Sherman Silverstein Kohl Rose & Podolsky**  
**308 Harper Drive**  
**Suite 200**  
**Moorestown, NJ 08057**  
**(856) 662-0700**  
**wmackin@shermansilverstein.com**

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court  
District of New Jersey**

In re	<u><b>Joly Jacob</b> <b>Anie Jacob</b></u>	Debtor(s)	Case No.	<u>                    </u>
			Chapter	<u><b>11</b></u>

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**Joly Jacob**  
**Anie Jacob**  
Printed Name(s) of Debtor(s)

X	<u><b>/s/ Joly Jacob</b></u>	<u><b>November 30, 2015</b></u>
	Signature of Debtor	Date

Case No. (if known)                     

X	<u><b>/s/ Anie Jacob</b></u>	<u><b>November 30, 2015</b></u>
	Signature of Joint Debtor (if any)	Date

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**Instructions:** Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court**  
**District of New Jersey**

In re Joly Jacob  
Anie Jacob

Debtor(s)

Case No.  
Chapter

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**11**

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## VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **November 30, 2015**

**/s/ Joly Jacob**

**Joly Jacob**

Signature of Debtor

Date: **November 30, 2015**

**/s/ Anie Jacob**

**Anie Jacob**

Signature of Debtor

Amca  
2269 S Saw Mill  
Elmsford, NY 10523

American Express  
Po Box 3001  
16 General Warren Blvd  
Malvern, PA 19355

American Express  
Po Box 297871  
Fort Lauderdale, FL 33329

American Honda Finance  
Po Box 168088  
Irving, TX 75016

American Honda Finance  
201 Little Falls Dr  
Wilmington, DE 19808

Amex Dsnb  
9111 Duke Blvd  
Mason, OH 45040

Amex/American Express  
American Express Special Research  
Po Box 981540  
El Paso, TX 79998

Amex/American Express  
Po Box 84063  
Columbus, GA 31908

Apex Asset  
2501 Oregon Pike  
Lancaster, PA 17601

Bank Of America  
Attention: Recovery Department  
4161 Peidmont Pkwy.  
Greensboro, NC 27410



Bank of America  
Attn: Correspondence Unit/CA6-919-02-41  
Po Box 5170  
Simi Valley, CA 93062

Bank of America  
450 American St  
Simi Valley, CA 93065

Bank Of America  
De5-019-03-07  
Newark, DE 19714

Banker's Healthcare Group, Inc.  
4875 Volunteer Road, Suite 100  
Fort Lauderdale, FL 33330

Bankers Healthcare  
4875 Volunteers Road, Suite 100  
Southwest Ranch, FL 33330

Bk Of Amer  
Po Box 982235  
El Paso, TX 79998

Bombay/Prism/Citibank  
Po Box 20507  
Attn: Centralized Bankruptcy  
Kansas City, MO 64195

Bombay/Prism/Citibank  
Po Box 6497  
Sioux Falls, SD 57117

Cap1/boscv  
26525 N Riverwoods Blvd  
Mettawa, IL 60045

Capital 1 Bank  
Attn: General Correspondence  
Po Box 30285  
Salt Lake City, UT 84130

Capital 1 Bank  
15000 Capital One Dr  
Richmond, VA 23238

Capital One  
Po Box 5253  
Carol Stream, IL 60197

Cbna  
Po Box 6283  
Sioux Falls, SD 57117

Cbna  
Po Box 6189  
Sioux Falls, SD 57117

Chase Card  
Po Box 15298  
Wilmington, DE 19850

Chase Freedom  
P.O. Box 15153  
Wilmington, DE 19886-5153

Chase Slate  
P.O. Box 15153  
Wilmington, DE 19886-5153

Children's Hospital of PA  
3401 Civic Center Blvd.  
Philadelphia, PA 19104

Citibank  
Citicorp/ Centralized Bankruptcy  
Po Box 790040  
Saint Louis, MO 63179

Citibank  
Po Box 6497  
Sioux Falls, SD 57117

Citibank Sd, Na  
Citi Corp Credit Services/Attn:Centraliz  
Po Box 790040  
Saint Louis, MO 63179

Citibank Sd, Na  
Attn: Centralized Bankruptcy  
Po Box 20363  
Kansas City, MO 64195

Citibank Sd, Na  
Pob 6241  
Sioux Falls, SD 57117

Citibank Sd, Na  
Po Box 6241  
Sioux Falls, SD 57117

Citizens Bank  
1 Citizen's Plaza  
Providence, RI 02903

City of Philadelphia

Columbia Savings Bank  
19-01 Route 208 N  
Fair Lawn, NJ 07410

Comenity Bank/Express  
Attn: Bankruptcy  
P.O. Box 182686  
Columbus, OH 43218

Comenity Bank/Express  
Po Box 182789  
Columbus, OH 43218

DeLage Landen  
DeLage Landen Financial Services, Inc.  
P.O. Box 41602  
Philadelphia, PA 19101-1602

Direct Capital Corp.  
155 Commerce Way  
Portsmouth, NH 03801

Discover Fin Svcs Llc  
Po Box 15316  
Wilmington, DE 19850

Ditech Financial Llc  
Po Box 6172  
Rapid City, SD 57709

Dsnb Macys  
911 Duke Blvd  
Mason, OH 45040

Elan Fin Svc  
777 E Wisconsin Ave  
Milwaukee, WI 53202

Employment Security Agency  
CN-077  
Trenton, NJ 08625

Equifax  
PO Box 740256  
Atlanta, GA 30374-0256

Experian  
PO Box 9701  
Allen, TX 75013-9701

Fia Csna  
4060 Ogletown/Stanton Rd  
Newark, DE 19713

First Data  
1307 Walt Whitman Rd  
Melville, NY 11747

First Data  
265 Broad Hollow R  
Melville, NY 11747

Gemb/walmart  
4125 Windward Plaza  
Alpharetta, GA 30005

Highland Capital  
5 Centre Avenue  
Little Falls, NJ 07424

Hsbc Mortgage Corp Usa  
2929 Walden Avenue  
Depew, NY 14043

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Joly Jacob DMD, P.C.  
443 W. Girard Avenue  
Philadelphia, PA 19123

Jose Costa/Costa Construction  
602 Dauphin Street  
Riverside, NJ 08075

Kohls/capone  
Po Box 3115  
Milwaukee, WI 53201

Larchmont Imaging  
401 Young Ave  
Suite 185  
Moorestown, NJ 08057

Mb Fin Svcs  
36455 Corporate Dr  
Farmington Hills, MI 48331

Navient  
Po Box 9655  
Wilkes Barre, PA 18773

New Jersey Attorney General Office  
Division of Law  
Richard J. Hughes Justice Complex  
25 Market Street, P.O. Box 112  
Trenton, NJ 08625-0112

Office of Attorney General  
Hughes Justice Complex  
P.O. Box 080  
25 W. Market Street  
Trenton, NJ 08625

Pioneer credit recovery  
P.o.Box 1018  
Moorestown, NJ 08057

Pnc - Clc  
Po Box 3180  
Pittsburgh, PA 15230

Pnc Bank, N.a.  
1 Financial Pkwy  
Kalamazoo, MI 49009

Prsm/cbna  
Po Box 6497  
Sioux Falls, SD 57117

Quickn Loans  
1050 Woodward Avenue  
Detroit, MI 48226

Rymr&flnign  
Po Box 94498  
Las Vegas, NV 89193

Sallie Mae  
300 Continental Dr  
Newark, DE 19713

Sams Club / GEMB  
Attention: Bankruptcy Department  
Po Box 103104  
Roswell, GA 30076

Sams Club / GEMB  
Po Box 965005  
Orlando, FL 32896

Sears/cbna  
Po Box 6497  
Sioux Falls, SD 57117

Sosamma Abraham  
84 Durness Drive  
Williamstown, NJ 08094

State of New Jersey  
Division of Taxation  
P.O. Box 046  
Trenton, NJ 08646-0046

State of New Jersey  
Division of Taxation  
Bankruptcy Unit  
CN 045  
Trenton, NJ 08695

State of New Jersey, Dept of Treasury  
Division of Pensions and Benefits  
PO Box 295  
Trenton, NJ 08625-0295

Synco/american Signatu  
C/o P.O. Box 965036  
Orlando, FL 32896

Synchrony Bank/Gap  
Attn: bankruptcy  
Po Box 103104  
Roswell, GA 30076

Synchrony Bank/Gap  
Po Box 965005  
Orlando, FL 32896

Synchrony Bank/JC Penny  
Attention: Bankruptcy  
Po Box 103104  
Roswell, GA 30076

Synchrony Bank/JC Penny  
4125 Windward Plaza  
Alpharetta, GA 30005

Synchrony Bank/Lenscrafters  
Attn: Bankruptcy  
Po Box 103104  
Roswell, GA 30076

Synchrony Bank/Lenscrafters  
C/o Po Box 965036  
Orlando, FL 32896

Synchrony Bank/Lowes  
Attn: Bankruptcy  
Po Box 103104  
Roswell, GA 30076

Synchrony Bank/Lowes  
Po Box 965005  
Orlando, FL 32896

Synchrony Bank/Old Navy  
Attn: Bankruptcy  
Po Box 130104  
Roswell, GA 30076

Synchrony Bank/Old Navy  
Po Box 965005  
Orlando, FL 32896

Target N.b.  
Po Box 673  
Minneapolis, MN 55440

Td Auto Finance  
Po Box 9223  
Farmington Hills, MI 48333

Toyota Motor Credit Co  
Toyota Financial Services  
Po Box 8026  
Cedar Rapid, IA 52408

Toyota Motor Credit Co  
4 Gatehall Dr Ste 350  
Parsippany, NJ 07054

Toyota Mtr  
Toyota Financial Services  
Po Box 8026  
Cedar Rapids, IA 52408

Toyota Mtr  
240 Gibraltar Rd Ste 260  
Horsham, PA 19044



Transunion  
PO Box 2000  
Crum Lynne, PA 19022-2002

Wells Fargo Financial  
National Bank  
P.O. Box 10347  
Des Moines, IA 50306-0347

Wffnatlbnk  
Po Box 94498  
Las Vegas, NV 89193

Fill in this information to identify your case:

Debtor 1 Joly Jacob

Debtor 2 Anie Jacob  
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey

Case number  
(if known)

☐ Check if this is an amended filing

## Official Form 22B

### Chapter 11 Statement of Your Current Monthly Income

12/14

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☐ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 18,200.00	\$ 13,217.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	\$ 0.00
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	\$ 0.00

Debtor 1 **Joly Jacob**  
Debtor 2 **Anie Jacob**

Case number (if known)

**7. Interest, dividends, and royalties**

Column A Debtor 1	Column B Debtor 2
\$ <b>0.00</b>	\$ <b>0.00</b>

**8. Unemployment compensation**

\$ <b>0.00</b>	\$ <b>0.00</b>
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Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you .....\$ **0.00**

For your spouse .....\$ **0.00**

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ <b>0.00</b>	\$ <b>0.00</b>
----------------	----------------

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. ....\$

10b. ....\$ **0.00**

10c. Total amounts from separate pages, if any. ....\$ **0.00**

\$	\$
\$ <b>0.00</b>	\$ <b>0.00</b>
+ \$ <b>0.00</b>	\$ <b>0.00</b>

**11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ <b>18,200.00</b>	+	\$ <b>13,217.00</b>	=	\$ <b>31,417.00</b>
Total current monthly income				

**Part 2: Deduct any applicable marital adjustment**

**12. Copy your total average monthly income from Line 11.**

\$ **31,417.00**

**13. Calculate the marital adjustment.** Check one:

☐ You are not married. Fill in 0 in line 13d.

☒ You are married and your spouse is filing with you. Fill in 0 in line 13d.

☐ You are married and your spouse is NOT filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13 d.

13a. ....\$

13b. ....\$

13c. ....\$

13d. Total .....\$

Copy here. => 13d. - **0.00**

**14. Your current monthly income.** Subtract line 13d from line 12.

14. \$ **31,417.00**

Debtor 1  
Debtor 2

**Joly Jacob**  
**Anie Jacob**

Case number (if known) \_\_\_\_\_

**Part 3: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Joly Jacob**  
**Joly Jacob**  
Signature of Debtor 1

**X /s/ Anie Jacob**  
**Anie Jacob**  
Signature of Debtor 2

Date **November 30, 2015**  
MM / DD / YYYY

Date **November 30, 2015**  
MM / DD / YYYY